

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	J.B.	20005	2-14-00
O.I.P.E. CLASSIFIER	XSW	32	2/9
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW		(65372)	2-18-00

## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 — (Through numeral)... Canceled A ..... Appeal  
 ÷ ..... Restricted O ..... Objected

Claim	Date
Final	
Original	
3	11
0	01
1	✓
2	✓
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10	✓
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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